



RESEARCH PAPER | HEALTHCARE & LIFE SCIENCES

# Is the Friction in Your Processes Sending Your Patients to Other Providers?

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# New study shows wide disparity in patient scheduling experience



**55%**  
of U.S. online adults are likely to abandon their transaction if they can't find a quick answer to their question or problem.  
— Forrester Research<sup>1</sup>

As some healthcare organizations respond to changing consumer expectations by adopting new, patient-friendly processes, patients will have a new criterion for choosing providers: the quality of the patient experience. If wide disparities emerge in this realm, providers who don't reduce the friction may find themselves less competitive than their peers.

The customer experience in healthcare is critical, affecting both patient outcomes and providers' competitiveness. Yet the traditional healthcare experience has been characterized by inefficiency and inconvenience, frustrating consumers who accepted it because they had no choice.

But the status quo is eroding. A recent NTT DATA study found that half of the consumers in the survey said they would switch providers for a better experience, one more like what they find when interacting with the retail, banking and travel industries. The study also found that 41.5% of patients want the ability to book an appointment online, and the percentage is expected to grow as younger, tech-savvy patients age and increase their use of health services. The willingness to change providers indicates a major change in consumer expectations, and that consumers are aware a better experience is available from healthcare providers who are transforming the way they do business.

The move toward more patient-centered care, combined with changing consumer expectations, has encouraged many physician practices and hospitals to rethink how they interact with patients. Unfortunately, the progress toward a better experience has been uneven. Despite the move toward easier, user-friendly processes and adoption of digital tools designed to provide an experience like that found in other industries, many health organizations still have unnecessary friction in the most basic patient transactions. And they may not be aware of this friction, or its effect on their patients.

# To reduce friction, identify it, measure it and find the root cause

The first step toward improving the customer experience is to identify the friction and measure its affect. That's why we created the proprietary NTT DATA Customer Friction Factor<sup>SM</sup> (CFF<sup>SM</sup>) methodology to help our clients identify and quantify the friction in their customer interactions: We first used this methodology in healthcare to measure the friction in the Medicare Advantage shopping and enrollment process for health plans. Read our paper on how "A Silver Tsunami Is Spurring Improvements in the Medicare Advantage Shopping Experience" to learn more.

Now, we have the results from a new study that looks at friction in customer interactions with healthcare providers.

In this study, we assessed the friction patients encountered at 25 major health systems in two transactions: making an appointment and cancelling an appointment. These are the most basic transactions between patients and healthcare providers, and often set the tone for the entire experience. And they're also the transactions that have traditionally come with lots of friction, such as long holds on the phone to talk to schedulers and redundant paperwork.

Our research found a wide disparity between the best and worst experiences. This disparity offers patients a new choice: convenient and easy, or less convenient and frustrating. Given consumer expectations and willingness to switch providers for a better experience, providers who offer ease of use and convenience will be more competitive. And those who provide a poorer experience may see many of their patients switch to providers who better meet their expectations.

## Using the CFF<sup>SM</sup> methodology to predict customer behavior

We conducted a CFF<sup>SM</sup> assessment on each provider organization included in our study. This approach for quantifying the customer experience looks at the factors that make doing business with a company easier or more difficult. We score the assessments like golf: The higher the score, the more friction in the transaction and the more likely the customer is to have negative feelings or simply walk away.

Unlike reactive measures, such as customer surveys and the Net Promoter Score, the CFF<sup>SM</sup> assessment is a forward-looking measure that can predict future customer attitudes and behaviors. It offers an opportunity to see your organization from the customer's perspective and be proactive, to improve your organization's customer experience even before a customer has a chance to complain (or walk away without telling you why).

The CFF<sup>SM</sup> assessment can also pinpoint factors that impede a customer's ability to complete a transaction, giving organizations insight into potential customers, not just current or past customers.

In our study of healthcare providers, we looked at two customer interactions:

- Making an appointment
- Canceling an appointment

For each of the two transactions, we measured five categories:

1. Engagement
2. Process
3. Technology
4. Knowledge
5. Ecosystem

## CFF<sup>SM</sup> Category Overview

 Engagement	 Process	 Technology	 Knowledge	 Ecosystem
<p>The manner in which the company interacts with the customer, and presents itself to the market.</p> <hr/> <p>Different portal hand-offs between organizations &amp; people</p>	<p>The focus on company, customer activities and the channels contained within a discernable process.</p> <hr/> <p>The number of customer driven steps and use of misdirection</p>	<p>Captures friction based on the technology architecture and customer inputs required to complete a process.</p> <hr/> <p>Number of keystrokes, pages engaged and load times</p>	<p>Relates to the availability, accuracy and utilization of the company's customer knowledge.</p> <hr/> <p>No active / passive knowledge transfer, information not auto-populated</p>	<p>The measurement of organizational integration and knowledge sharing within itself and 3<sup>d</sup> parties.</p> <hr/> <p>Portals utilized and hand-offs between organizations and people</p>

Many companies measure do not measure any aspect of their customer journey. Those that do measure it tend to focus on the quantity of interactions as opposed to the quality of an interaction. At the same time, many customer experience assessments focus too heavily on the technical aspects of the experience: Does the webpage load and respond quickly? With the CFF<sup>SM</sup> assessment, we focus on understanding the overall quality of the end-to-end customer experience.

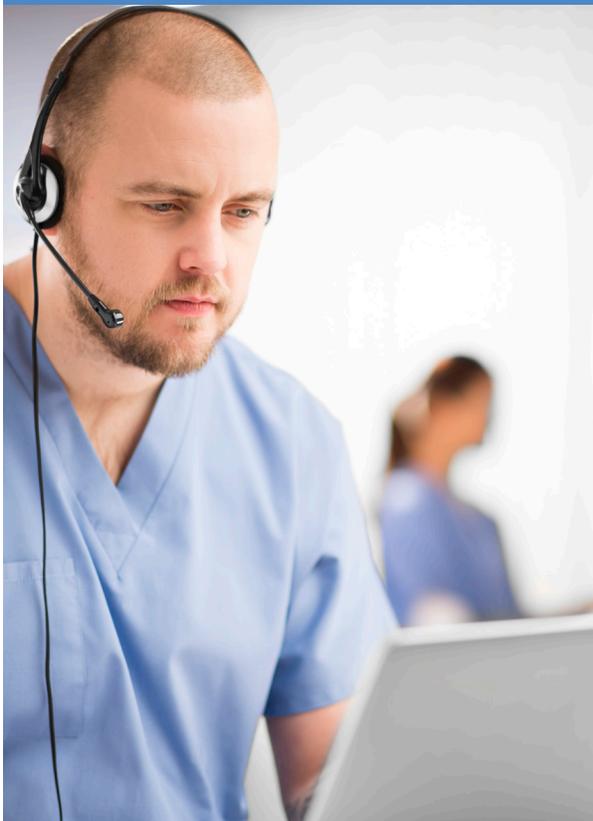
### Finding insights that lead to action

The crucial insight the CFF<sup>SM</sup> assessment is designed to discover is the precise point when (or where) a customer decides to disengage. Identifying that point requires an organization to both define and understand the customer's journey and to see its business from the customer's perspective. To understand and improve the customer journey, providers must accurately measure customer friction and reduce it. The CFF<sup>SM</sup> assessment is a quantitative, objective and proactive method that yields precise results that can identify problems and point the way to solutions. It can generate the data to see the transformation an organization needs and help the organization realign its applications, processes, infrastructure and approach to reflect the needs of its end customers and stakeholders.

Although this study is limited to the assessment phase of the CFF<sup>SM</sup> methodology, the full process also includes analysis of the scores and comparison with industry benchmarks; diagnosis of root causes of friction and development of a solution roadmap for improvement; and implementation of solutions.

Although the quality of the technology can enhance the experience, engagement and process have far more influence over the quality of the experience.

That's a good reason to have a third-party objective assessment, because organizations tend to be blind to the friction in their processes. And even when they are aware of it, they tend to discount the effect of that friction on patient satisfaction.



## How the organizations scored

In our study, 83% of the friction came from three categories: engagement (29%), process (43%) and ecosystem (11%). Knowledge and technology made up the remaining 17%.

The best organization averaged 117 (very low friction) overall for both transactions, and the worst scored 320 (very high friction). Some of the best-performing providers (our Leaders) showed opportunities for improvement, and the worst performers (the Laggards) had bright spots where they performed well.

It's interesting to note that the quality of the technology a provider used didn't correlate strongly with the quality of the overall customer experience. Some of the worst scores were from organizations that scored very well in the technology category, while some of the Leaders scored poorly in the technology category. Although the quality of the technology can enhance the experience, engagement and process have far more influence over the quality of the experience. That's a good reason to have a third-party objective assessment, because organizations tend to be blind to the friction in their processes. And even when they are aware of it, they tend to discount the effect of that friction on patient satisfaction.

### Scores for transaction 1: Making an appointment

Only 56% of the organizations in the study enabled the customer to schedule an appointment online. The others offered the ability to request an appointment via secure messaging or email but required the patient to wait for a callback to complete the scheduling. While this eliminates the time on hold, the patient often ends up in a game of telephone tag with the office staff, especially if they work full time in a job where they cannot immediately answer their phone during office hours.

Many organizations that offered online scheduling introduced confusion and adversely affected loyalty by not owning the transaction. Instead, they used third-party apps, all of which had challenges. We saw four distinct versions: one that was integrated with the provider's electronic health records and three that weren't integrated. The integrated system was only available to existing patients through a patient portal. Two of the non-integrated systems required both new and existing patients to register with the app, including entering insurance information, to schedule an appointment. The third non-integrated system didn't require preregistration but was limited to current and next-day appointments only. In all cases, the non-integrated systems ceded branding control to the app, causing confusion and losing the opportunity to reinforce brand identity.

Reviewers saw the preregistration process as a major source of friction, because it diverted the patient from the primary goal of scheduling, adding extra time and steps in the process.

The Leaders in our study enabled customers to directly schedule online and provided a retail-like experience, including a follow-up email to confirm the appointment. Many also provided automated reminders, which can reduce no-shows.

The scores for this transaction — making an appointment — varied from a low of 131 (least friction) to a high of 373 (most friction), with the top performers all falling below 250.

## Scores for transaction 2: Canceling an appointment

The Leaders for this transaction empowered patients to cancel an appointment online in two steps or less. Conversely, all the Laggards for this transaction didn't offer the ability to cancel an appointment online, forcing customers to call. Evaluators saw this channel switching (from online to telephone) as a source of friction, as it led directly to the friction of sitting on hold waiting for a scheduler to answer. Channel switching also may increase the possibility that patients simply won't show up, rather than take the time to call (or, if they do call, end the call before talking to the scheduler).

On average, Laggards used 50% more process steps than Leaders to cancel an appointment, increasing both the time necessary to complete the goal and the patient's frustration.

Scores for this transaction — canceling an appointment — varied from a low of 83 (very little friction) to a high of 270 (lots of friction), with the Leaders scoring under 144.

# Using the data to improve the customer experience

As we noted earlier, the CFF<sup>SM</sup> assessment is just the first step toward improving the patient experience. It gives providers a better view of how patients see their organizations and what those patients experience in their interactions with them. Once the organization has the data, it can delve deeper to find the root cause of the friction and create a plan for reducing it. To do that effectively, organizations must design new processes using the consumer point of view, which is a big change.

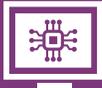
While appointment scheduling is the first interaction providers have with patients, it's just one aspect of the patient experience. Renewing prescriptions, predicting costs, communicating with staff and a dozen other transactions have the potential to create a positive or negative experience. Organizations intent on providing a good patient experience need to look beyond transactions to the underlying culture of the organization.

## CFF<sup>SM</sup> Aggregate Analysis



### Building Relationships

- 50% of Leaders let a new customer schedule a first visit with minimum information, delaying detailed registration until the appointment time and creating a positive start to the relationship.
- Less than one-third of companies enabled potential customers to control the transaction and to switch the site's language.
- One site used a popular translation application that distorted the word conversion, creating a less than desirable translation.



### Digital Experience

- Best-in-class providers had a tightly integrated web, mobile text and email scheduling system for a superior digital experience.
- 56% enabled customers to schedule an appointment online and receive transaction confirmation via email.
- Nearly one-third of companies required account creation for scheduling or cancelling appointments but failed to use the information, forcing customers to repeat data and creating greater friction.



### Process Control

- 100% of Leaders empowered customers to control the entire process, from scheduling to cancelling an appointment online.
- 44% of companies didn't offer real-time online scheduling and instead forced customers to follow the provider's defined route of execution to complete the transactions.
- Evaluators observed that Laggards dictated the response to appointment requests — ranging from no defined timeframe to up to three business days — causing loss of customer control and delays in achieving the goal.

## Conclusion

Because scheduling is at the front end of every patient visit, it can set the tone for the entire patient experience. It's an opportunity to build relationships and should be treated with care. Half the Leaders in our study made a good start with new patients by enabling them to schedule a first visit with minimum information and delaying detailed registration requirements to the time of the appointment, creating a positive start to the relationship.

Engagement accounted for 29% of the friction, with process contributing 43% and ecosystem 11%. The top performer provided a simplified, retail-like online experience for both making and canceling an appointment.

In contrast, the Laggards added registration requirements before allowing scheduling or forced users to move from online to phone. This added time and frustration to the task. In some instances, patients were forced to register online before they could cancel online. Also, labeling a process as "online scheduling" when it was actually "online request for an appointment" misrepresents the provider's capability and increases frustration and distrust. It also shifts control back to the provider and away from the patient, which evaluators viewed as a negative.

The Leaders tightly integrated web, mobile text and email scheduling systems for a superior digital experience. Laggards required account creation for scheduling or canceling appointments but failed to use the provided information, forcing the patient to repeat data and increasing friction.

All the Leaders empowered customers to control the entire process, from scheduling to canceling an appointment online, generating very little friction in doing so. Laggards did the opposite, dictating the channel for completing the process, setting the timeline for response and requiring unnecessary steps that increased friction and delayed completion.



# About the authors

## [Atul Kichambare](#), Global Solutions Leader, Healthcare & Life Sciences

Atul focuses on patient engagement strategies and solutions, telemedicine and the internet of things. He advises and consults as a strategic partner for customers and provides industry insights and thought leadership. Atul has more than 20 years of IT experience, including 15 years in healthcare IT. He's led several large, complex, global projects for some of the largest healthcare providers. Atul is passionate about improving patient experiences by leveraging innovative technology. He has an MBA in international business from Oklahoma State University and a Bachelor of Science in Computer Engineering from VJTI, India.

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# How NTT DATA can help

Our Healthcare Services team has deep knowledge of all phases of the healthcare delivery process and experience helping providers evolve as patient-centered organizations. We provide a wide range of services to help providers deliver an exceptional customer experience, including:

- Digital healthcare consulting
- User experience design
- Journey mapping
- Virtual visits implementation and support
- Mobile app development
- Responsive web development
- Customer relationship management systems

For more information about CFF<sup>SM</sup> assessment, send an email to the author or visit our website.

# Sources

- <sup>1</sup> Leggett, Kate; Schoeller, Art; et al. "Contact Centers Must Go Digital Or Die." Forrester Research. April 3, 2015. <https://www.forrester.com/report/Contact+Centers+Must+Go+Digital+Or+Die/-/E-RES122341>

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